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|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------------|---------|-------------|--|
| No. <b>W 76371</b>                                                                                                                                     |                  | <b>Due no later than Jul 31, 2015</b>                                                                                                                |           | 2. Registered Agent and Address <b>(NO PO BOX)</b>       |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                  | <b>Annual Report Form</b>                                                                                                                            |           | MARY NEMKEREKYAN<br>93 E BRIDGE ST<br>BLACKFOOT ID 83221 |         |             |  |
|                                                                                                                                                        |                  | <b>1. Mailing Address: Correct in this box if needed.</b><br>FLOWER SHOPPE ETC LLC (THE)<br>MARY NEMKEREKYAN<br>93 E BRIDGE ST<br>BLACKFOOT ID 83221 |           | 3. <u>New</u> Registered Agent Signature:*               |         |             |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                  |                                                                                                                                                      |           |                                                          |         |             |  |
| Office Held                                                                                                                                            | Name             | Street or PO Address                                                                                                                                 | City      | State                                                    | Country | Postal Code |  |
| MEMBER                                                                                                                                                 | MARY NEMKEREKYAN | 93 E BRIDGE                                                                                                                                          | BLACKFOOT | ID                                                       | USA     | 83221       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 76371</b>                                                                                           |                  | 6. Annual Report must be signed.*<br>Signature: Mary Nemkerekyan<br>Name (type or print): Mary Nemkerekyan<br>Date: 09/24/2015<br>Title: member      |           |                                                          |         |             |  |
| Processed 09/24/2015                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                            |           |                                                          |         |             |  |